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Request		Application Number	10/533	,770 – Conf. #4179
for (DOF)		Filing Date	May 4, 2005	
Continued Examination (RCE) Transmittal		First Named Inventor	Wiesmuller, et al.	
Address to:		Art Unit	1794	
Mail Stop RCE Commissioner for Patents		Examiner Name	A. J. Weier	
P.O. Box 1450 Alexandria, VA 22313-1450		Attorney Docket Number	NY-HU	BR-1281-US
This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 1, 1995, or to any design application.				
Submission required under 37 CFR 1.114. Nex: the RCE is proper, any previously field unertened amendments and amendments enclosed with the RCE will be enferred in the order in which they were filled unless applicant instructs otherwise. If applicant does not wish to have any previously filed unerhired amendment(e) entered, applicant must request non-entry of such amendment(s). a. X Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked. 1. Consider the arguments in the Appeal Brief or Reply Brief previously filed on				
Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required) Dider The College under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed. X The Director is hereby authorized to charge the following fees, any underpayment of fees, or credit any				
overpayments to Deposit Account No. 50-0624 . I have enclosed a duplicate copy of this sheet. i. X RCE fee required under 37 CFR 1.17(e) ii. X Extension of time fee (37 CFR 1.136 and 1.17) iii. Other				
b. Check in the amount of \$ Enclosed C. Yeyment by credit card (Form PTO-2038 enclosed) VARNING: Information on this form may become public. Credit card information should not be included on this form. Provide motific card information and authorization on PTO-2038.				
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED				
Signature	Jane K benjan	Date	9/2	3/09
Name (Print/Type)	James R. Crawford	Registra	tion No.	39,155

I heneby certify that this paper (along with any paper referred to as being attached or enclosed) is being filed electronically addressed to: MS RCE. Commissioner to Patients, P.O. Box 1450, Alexandria, VA. 22313-1450.

Dated: 4/28/09 Signature: Licon Months of the Commissioner Stephens Sheffield)